

This Form is for INTERNAL PTO USE ONLY
It does NOT get mailed to the applicant.

NOTICE OF FILING / CLAIM FEE(S) DUE
(CALCULATION SHEET)

APPLICATION NUMBER: 09782596

Total Fee Calculation

Fee Code Sml/Lg.	Total # Claims	Number Extra	X	Fee	Fee
				Sml. Entity	Lg. Entity
Basic Filing Fee	<u>201/101</u>				<u>710</u>
Total Claims >20	<u>203/103</u>	<u>18</u>	-20 =	X	
Independent Claims >3	<u>202/102</u>	<u>4</u>	-3 =	X	<u>80</u>
Mult. Dep Claim Present	<u>204/104</u>				
Surcharge	<u>205/105</u>				<u>130</u>
English Translation	<u>139</u>				

TOTAL FEE CALCULATION

Fees due upon filing the application:

Total Filing Fees Due = \$ 492.00

Less Filing Fees Submitted - \$ _____

BALANCE DUE = \$ _____